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APPLICANTS

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** CONTINUING DATA *****

None *None*

** FOREIGN APPLICATIONS *****

None *None*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED.. SMALL ENTITY **

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Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY CA	SHEETS DRAWING 2	TOTAL CLAIMS 1	INDEPENDENT CLAIMS 1
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature <i>[Signature]</i> Initials				

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TITLE

Communications point-of-presence

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